## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re: SERENA R WILSON	Case No. 15-07470
Debtor(s)	

## CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 03/03/2015.
- 2) The plan was confirmed on 06/08/2015.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C.  $\S$  1329 on  $\underline{NA}$  .
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on  $\underline{NA}$ .
  - 5) The case was dismissed on 09/19/2016.
  - 6) Number of months from filing to last payment: 18.
  - 7) Number of months case was pending: 21.
  - 8) Total value of assets abandoned by court order: NA.
  - 9) Total value of assets exempted: NA.
  - 10) Amount of unsecured claims discharged without payment: \$0.00.
  - 11) All checks distributed by the trustee relating to this case have cleared the bank.

## Receipts:

Total paid by or on behalf of the debtor \$3,230.73 Less amount refunded to debtor \$80.77

NET RECEIPTS: \$3,149.96

## **Expenses of Administration:**

Attorney's Fees Paid Through the Plan \$3,017.87

Court Costs \$0.00

Trustee Expenses & Compensation \$132.09

Other \$0.00

TOTAL EXPENSES OF ADMINISTRATION: \$3,149.96

Attorney fees paid and disclosed by debtor: \$2.00

Scheduled Creditors:						
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
AT & T	Unsecured	117.25	NA	NA	0.00	0.00
CITY OF CHICAGO DEPT OF REVENU	Unsecured	5,000.00	6,611.83	6,611.83	0.00	0.00
COMCAST	Unsecured	198.93	NA	NA	0.00	0.00
COMMONWEALTH EDISON	Unsecured	634.00	493.10	493.10	0.00	0.00
CREDIT ACCEPTANCE CORP	Unsecured	6,413.70	5,988.42	5,988.42	0.00	0.00
Dish	Unsecured	956.45	NA	NA	0.00	0.00
IL LABORATORY MEDICINE ASSOC	Unsecured	39.10	NA	NA	0.00	0.00
MIDSTATE COLLECTION SOLUTION	Unsecured	2,597.00	NA	NA	0.00	0.00
PALISADES	Unsecured	NA	9,836.50	9,836.50	0.00	0.00
PCC COMMUNITY WELLNESS	Unsecured	175.00	NA	NA	0.00	0.00
ST IL TOLLWAY AUTHORITY	Unsecured	215.00	NA	NA	0.00	0.00
TCF BANK	Unsecured	1,176.00	NA	NA	0.00	0.00
UNIVERSITY OF IL MEDICAL CNT	Unsecured	2,321.00	NA	NA	0.00	0.00
UNIVERSITY OF ILLINOIS PHYSICIAN	Unsecured	532.00	NA	NA	0.00	0.00
WEST SUBURBAN HEALTH CARE	Unsecured	192.28	NA	NA	0.00	0.00

Claim	Principal	Interest
Allowed	<u>Paid</u>	<u>Paid</u>
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$22,929.85	\$0.00	\$0.00
	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Allowed         Paid           \$0.00         \$0.00           \$0.00         \$0.00           \$0.00         \$0.00           \$0.00         \$0.00           \$0.00         \$0.00           \$0.00         \$0.00           \$0.00         \$0.00           \$0.00         \$0.00           \$0.00         \$0.00           \$0.00         \$0.00           \$0.00         \$0.00

Disbursements:		
Expenses of Administration Disbursements to Creditors	\$3,149.96 \$0.00	
TOTAL DISBURSEMENTS :		<u>\$3,149.96</u>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 12/06/2016 By: /s/ Tom Vaughn
Trustee

**STATEMENT**: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.